

July 9, 1998

**EVALUATION PROTOCOL FOR GULF WAR VETERANS WITH POTENTIAL
EXPOSURE TO DEPLETED URANIUM (DU)**

1. PURPOSE: This Veterans Health Administration (VHA) Directive outlines the policy and procedures for evaluating Gulf War veterans with possible exposure to depleted uranium (DU).

2. BACKGROUND

a. DU is natural uranium left over after most of the U-235 isotope has been removed; such as that used as fuel in nuclear power plants. It is about half as radioactive as natural uranium and is a radiation hazard primarily if internalized, such as in shrapnel, contaminated wounds, and inhalation. In addition to its radioactivity, DU has some chemical toxicity related to being a heavy metal (similar to lead).

b. During the Gulf War, DU was used by the United States military in projectiles and armor for tanks. Service personnel who may have had potential inhalation exposures to DU include those on, in, or near vehicles hit with "friendly fire," rescuers entering burning vehicles, individuals near fires involving DU munitions, individuals salvaging damaged vehicles, and those near burning vehicles.

c. The medical effects of DU exposure are continuing to be evaluated. A group of Gulf War veterans with retained DU fragments or DU-contaminated wounds is being followed at a special DU Program at the Department of Veterans Affairs (VA) Medical Center, Baltimore, MD. While no clinically significant adverse effects of DU have been evident to date in this group, some abnormalities have been detected on specialized testing.

d. The Baltimore DU Follow-up Program has determined that for Gulf War friendly fire victims, a 24-hour urine determination for uranium is a more sensitive screening test for DU than whole-body counting.

e. For additional background information on DU see the references in paragraph 6.

f. The Austin Automation Center (AAC) functions as the "contractor" to VHA in providing national level computer support for this DU program.

3. POLICY: Each VHA facility will use the DU protocol examination to evaluate Gulf War veterans identified and referred by the Department of Defense (DOD) or those veterans who self-refer because they are concerned about potential inhalation exposure to DU according to the protocol outlined in paragraph 4.

4. ACTIONS

a. VA Gulf War Registry programs will provide DU protocol examinations to Gulf War veterans identified by DOD. VA medical centers will be notified by Gulf War program staff that a veteran has been referred by DOD to their medical facility for the DU protocol examination.

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b. The DU protocol consists of a Gulf War Registry examination, DU exposure questionnaire and a 24-hour urine collection for creatinine and uranium.

c. The exposure history contained on VA Form 10-9009D, Depleted Uranium (DU) Questionnaire, (see Att. A) will be administered to each veteran who is concerned about possible DU exposure. Any positive responses to the DU questionnaire are to be followed up with more detailed history-taking by the examining healthcare provider. The full exposure history will be recorded in the veterans's consolidated health record (CHR). All free text on the DU questionnaires will be included in the CHR, but not in the Registry dataset at AAC. Veterans should be asked if they are willing to have their data shared with DOD, and their response entered on the DU code sheet supplement, question 43. If yes, VA Form 70-3288, Request for and Consent to Release of Information From Claimant's Records, (see Att. C) should be completed and filed in the veteran's Consolidated Health Record. Completed DU questionnaires will be submitted to AAC on completion of protocol examination.

d. If the veteran was not identified by DOD as possibly DU exposed, but information provided during the examination of the veteran suggests that the veteran may have had a significant exposure to DU or if the veteran has a high level of concern that such an exposure occurred despite counseling by the healthcare provider, a DU protocol examination should be completed. The health care provider will contact the DU Follow-up Program at the Baltimore VA Medical Center (1-800-815-7533) to discuss obtaining a 24-hour urine collection for uranium.

e. The 24-hour urine collection for uranium will be performed in accordance with instructions in Attachment B.

f. Upon completion of the protocol examination, the Gulf War Registry code sheet and the DU exposure questionnaire will be forwarded by the Registry Coordinator to AAC for entry of the examination results into the Gulf War Registry database. **NOTE:** *If the veteran has already had a Gulf War Registry exam, only the DU code sheet will be sent to AAC.*

g. Results of the 24-hour urine for uranium will be communicated directly to the veteran by letter from the Baltimore DU Follow-up Program with a copy to the VA referring physician for the veteran's CHR. The Baltimore DU program staff will also forward the urine uranium results to AAC for entry into the Registry database.

h. Follow-up actions for any veteran with an elevated 24-hour urine uranium determination will be individualized based on discussion between the veteran's primary VA physician and the staff at the Baltimore DU Follow-up Program.

i. Additional diagnostic evaluation of signs or symptoms identified during the examination should be completed as clinically indicated. Eligible veterans who wish to have VA follow-up care should be assigned to a primary care team.

5. REFERENCES

a. Voelz, George L., Chapter 13 - "Uranium," in Hazardous Material Toxicology, Eds. Sullivan, John B. and Krieger, Gary R. Williams and Wilkins, Baltimore, MD, 1992.

b. Health Effects of Depleted Uranium - Fact Sheet, Department of Defense, June 11, 1993.
NOTE: Copies can be obtained by calling (703) 697-3189.

c. "Agency for Toxic Substances and Disease Registry," U.S. Public Health Service. 1990.

d. Toxicologic Profile for Uranium. PB91-180 471, US. Department of Commerce, National Technical Information Service. *NOTE: Customer Service is (703) 487-4660.*

e. "Depleted Uranium," A Guide to Gulf War Veterans' Health, Department of Veterans Affairs, Employee Education System, St Louis Center (14B/JB), St. Louis, MO 63125

6. FOLLOW-UP RESPONSIBILITY: The Chief Public Health and Environmental Hazards Officer (13) is responsible for the contents of this directive. Questions about DU should be addressed to the Baltimore DU Follow-up Program at 1-800-815-7533; General questions about the protocol should be addressed to the Environmental Agents Service at (202) 273-8580.

7. RESCISSION: This VHA Directive will expire July 9, 2003.


S/ by Thomas Garthwaite, M.D. for
Kenneth W. Kizer, M.D., M.P.H.
Under Secretary for Health

Attachments

DISTRIBUTION: CO: E-mailed 7/14/98
FLD: VISN, MA, DO, OC, OCRO and 200 - FAX 7/14/98
EX: Boxes 104, 88, 63, 60, 54, 52, 47 and 44- FAX 7/14/98

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ATTACHMENT A

 Department of Veterans Affairs										DEPLETED URANIUM (DU) QUESTIONNAIRE (SUPPLEMENT TO GULF WAR CODESHEET, VA FORM 10-9009D(RS))										
TT	#1	Facility Number (Use PTF No. only) (2 - 4)													Suffix (5 - 7)					
The information the veteran supplies may be disclosed outside the VA to Federal, State and local government agencies and National Health Organizations to assist in the development of programs for research purposes and other uses as stated in the "Notice of Systems of VA Records" published in the Federal Register in accordance with the Privacy Act of 1974.																				
<u>INSTRUCTIONS:</u> Registry Physician or Coordinator: Please print. Use only one letter or number per block. If possible use black ballpoint or felt-tip pen. Shaded areas are for VA use only. All free text on this code sheet will be retained in medical health record but not included in the registry dataset at AAC.																				
PART IV (DEPLETED URANIUM [DU])																				
2. LAST NAME (8-33)																				
3. FIRST NAME (34-48)										4. SOCIAL SECURITY NUMBER (49-58)										
										P										
5. PHONE NUMBERS WHERE YOU MAY BE CONTACTED:																				
5A. DAYTIME PHONE (59-68)										5B. EVENING PHONE (69-78)										
()			-				()			-				
6. TODAY'S DATE (79-86) e.g. 05191998 (May 19, 1998)										7. DATE OF ARRIVAL IN PERSIAN GULF WAR THEATRE OF OPERATION (87-94) e.g. 06191991 (June 19, 1991)					8. DATE OF DEPARTURE FROM PERSIAN GULF WAR THEATRE OF OPERATION (95-102) e.g. 11121991 (November 12, 1991)					
TO BE COMPLETED BY REGISTRY COORDINATOR OR PHYSICIAN																				
<u>Instructions:</u> Please respond to all questions entering one of the listed codes in Column (b).															(a) BLOCK	(b) CODE				
9. WHO REFERRED YOU TO THE VA MEDICAL CENTER FOR EVALUATION? Code "a" = Office of the Special Assistant for Gulf War Illness (OSAGWI) of Department of Defense? Code "b" = Another Department of Defense Office Code "c" = Department of Veterans Affairs (VA) Code "d" = Self Referred Code "e" = Other sources (identify on following lines) _____ _____															103					
10. WHERE DID YOU SERVE? Enter Code "Y"= Yes or "N"= No in Blocks 104a through 104e.																				
10a. Code "a" = Kuwait															104a					
10b. Code "b" = Saudi Arabia															104b					
10c. Code "c" = Iraq															104c					
10d. Code "d" = Only on a ship (not ashore)															104d					

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DEPLETED URANIUM QUESTIONNAIRE, Continued				SSN								
										(a) BLOCK	(b) CODE	
10e. Code "e" = Other (identify on following lines) _____										104e		
Instructions: Choose one of the following codes for Questions 11 through 39, unless other codes are listed or a narrative Response is required: Code "Y" = Yes Code "N" = No Code "D" = Don't Know												
11. WERE YOU A LOGISTICS ASSISTANCE REPRESENTATIVE (LAR) WHO INSPECTED DEPLETED URANIUM CONTAMINATED SYSTEMS TO DETERMINE REPAIRABILITY?										105		
12. WERE YOU A MEMBER OF A BATTLE DAMAGE ASSESSMENT TEAM (BDAT) WHO EXAMINED U.S. COMBAT VEHICLES KNOWN, OR SUSPECTED TO BE, DAMAGED OR DESTROYED BY DU?										106		
13. WERE YOU A MEMBER OF THE 144 TH SERVICE AND SUPPLY COMPANY WHO PROCESSED DAMAGED EQUIPMENT, INCLUDING SOME WITH DU CONTAMINATION?										107		
14. WERE YOU A MEMBER OF A RADIATION CONTROL (RADCON) TEAM DEPLOYED IN THE PERSIAN GULF?										108		
15. WERE YOU INVOLVED IN THE EXAMINATION OR RECOVERY OF DAMAGED OR DESTROYED <u>ENEMY</u> VEHICLES?										109		
16. WERE YOU INVOLVED IN THE DOWNLOADING OF EQUIPMENT OR MUNITIONS FROM VEHICLES KNOWN OR SUSPECTED TO BE CONTAMINATED BY DU?										110		
17. WERE YOU A MEMBER OF A UNIT MAINTENANCE TEAM PERFORMING MAINTENANCE ON OR IN SYSTEMS KNOWN OR SUSPECTED TO BE CONTAMINATED BY DU?										111		
18. WERE YOU AT DOHA ON JULY 11, 1991, AT THE TIME OF THE FIRE?										112		
18a. WERE YOU DIRECTLY INVOLVED IN CLEAN-UP OPERATIONS FOLLOWING THE DOHA EXPLOSION AND FIRE?										112a		
18b. WERE YOU EXPOSED TO SMOKE FROM BURNING DOHA ROUNDS?										112b		
19. WERE YOU IN OR ON A VEHICLE HIT BY <u>ENEMY</u> FIRE AT THE TIME IT WAS HIT? IF "NO," SKIP TO QUESTION 20.										113a		
19a. IF "YES," WHAT TYPE OF A VEHICLE?												
19a(1). Code "a" = ABRAMS battle tank										113b		
19a(2) Code "b" = BRADLEY fighting vehicle										113c		
19a(3). Code "c" = Other (identify as follows) :										113d		
19a(4). Code "d" = Don't know										113e		
19b. IF "YES," WAS THE VEHICLE HIT BY DU MUNITIONS?										113f		
20. DID YOU ENTER AN ABRAMS BATTLE TANK TO PERFORM RESCUE OPERATIONS IMMEDIATELY AFTER IT WAS STRUCK BY <u>ENEMY</u> FIRE?										114		
21. DID YOU ENTER AN ABRAMS BATTLE TANK TO RETRIEVE SENSITIVE ITEMS IMMEDIATELY AFTER IT WAS STRUCK BY <u>ENEMY</u> FIRE?										115		
22. DID YOU ENTER A BRADLEY FIGHTING VEHICLE TO PERFORM RESCUE OPERATIONS IMMEDIATELY AFTER IT WAS STRUCK BY <u>ENEMY</u> FIRE?										116		
23. DID YOU ENTER A BRADLEY FIGHTING VEHICLE TO RETRIEVE SENSITIVE ITEMS IMMEDIATELY AFTER IT WAS STRUCK BY <u>ENEMY</u> FIRE?										117		

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DEPLETED URANIUM QUESTIONNAIRE, Continued						SSN								
											(a) BLOCK	(b) CODE		
24. WERE YOU IN OR ON ANY VEHICLE HIT BY <u>FRIENDLY</u> FIRE AT THE TIME IT WAS HIT? IF "NO," SKIP TO QUESTION 25.											118			
24a. IF "YES," WHAT TYPE OF VEHICLE?														
24a(1). Code "a" = ABRAMS battle tank											118a			
24a(2). Code "b" = BRADLEY fighting vehicle											118b			
24a(3). Code "c" = other (identify on following lines)											118c			
24a(4). Code "d" = Don't Know											118d			
24b. WAS THE VEHICLE HIT BY DU MUNITIONS?											118e			
25. DID YOU ENTER AN ABRAMS BATTLE TANK TO PERFORM RESCUE OPERATIONS IMMEDIATELY AFTER IT WAS STRUCK BY <u>FRIENDLY</u> FIRE?											119			
26. DID YOU ENTER AN ABRAMS BATTLE TANK TO RETRIEVE SENSITIVE ITEMS IMMEDIATELY AFTER IT WAS STRUCK BY <u>FRIENDLY</u> FIRE?											120			
27. DID YOU ENTER A BRADLEY FIGHTING VEHICLE TO PERFORM RESCUE OPERATIONS IMMEDIATELY AFTER IT WAS STRUCK BY <u>FRIENDLY</u> FIRE?											121			
28. DID YOU ENTER A BRADLEY FIGHTING VEHICLE TO RETRIEVE SENSITIVE ITEMS IMMEDIATELY AFTER IT WAS STRUCK BY <u>FRIENDLY</u> FIRE?											122			
29. DID YOU ENTER ANY <u>ENEMY</u> VEHICLE TO PERFORM RESCUE OPERATIONS IMMEDIATELY AFTER IT WAS STRUCK BY OUR FIRE? IF "NO," SKIP TO QUESTION 30.											123			
29a(1). Code "a" = Tank											123a			
29a(2) Code "b" = Other tracked vehicle (identify on following lines)											123b			
29a(3). Code "c" = Truck											123c			
29a(4). Code "d" = Other wheeled vehicle (identify on following lines)											123d			
29a(5). Code "e" = Other type vehicle (identify on following lines)											123e			
29a(6). Code "f" = Don't know											123f			
30. DID YOU ENTER ANY <u>ENEMY</u> VEHICLE TO RETRIEVE SENSITIVE ITEMS OR INTELLIGENCE MATERIAL IMMEDIATELY AFTER IT WAS STRUCK BY OUR FIRE? IF "NO," SKIP TO QUESTION 31.											124			
30a. IF "YES," WHAT TYPE OF VEHICLE?														
30a(1). Code "a" = Tank											124a			

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DEPLETED URANIUM QUESTIONNAIRE, Continued				SSN:									
											(a) BLOCK	(b) CODE	
30a(2) Code "b" = Other tracked vehicle (identify on following lines)											124b		
30a(3). Code "c" = Truck											124c		
30a(4). Code "d" = Other wheeled vehicle (identify on following lines)											124d		
30a(5). Code "e" = Other type vehicle (identify on following lines)											124e		
30a(6). Code "f" = Don't know											124f		
31. WERE YOU EXPOSED TO SMOKE FROM ANY <u>ENEMY</u> EQUIPMENT STRUCK BY DU ROUNDS?											125		
32. DID YOU REMOVE EQUIPMENT OR OTHER ITEMS FROM A DAMAGED OR DESTROYED U.S. OR <u>ENEMY</u> VEHICLE? IF "NO," SKIP TO QUESTION 33.											126		
32a. If you removed something from a vehicle, please describe it on the following lines:													
32b. Do you still have equipment or other items removed from a damaged or destroyed U.S. or enemy vehicle?											126a		
33. WERE YOU WITHIN 50 METERS OF A VEHICLE WHEN IT WAS HIT (NOT INCLUDING VEHICLES YOU WERE IN OR ON THAT WERE HIT)? IF "NO," SKIP TO QUESTION 34.											127		
33a. IF YES, WHAT TYPE OF VEHICLE?													
33a(1). Code a = ABRAMS battle tank											127a		
											127b		
33a(2). Code b = BRADLEY fighting vehicle													
33a(3). Code c = other (identify on following lines)											127c		
33a(4). Code d = Don't Know											127d		
33b. WAS THE VEHICLE HIT BY DU MUNITIONS?											127e		
34. DID YOU BREATHE SMOKE OR DUST FROM VEHICLES HIT BY <u>ENEMY</u> OR <u>FRIENDLY</u> FIRE? IF "NO," SKIP TO QUESTION 35.											128		
34a. IF "YES," WHAT TYPE OF VEHICLE?													
34a(1). Code "a" = ABRAMS battle tank											128a		
34a(2). Code "b" = BRADLEY fighting vehicle											128b		
34a(3). Code "c" = other (identify on following lines)											128c		
34a(4). Code "d" = Don't Know											128d		
34b. WAS THE VEHICLE HIT BY DU MUNITIONS?											128e		

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DEPLETED URANIUM QUESTIONNAIRE, Continued				SSN									
										(a) BLOCK	(b) CODE		
35. DID YOU CLIMB ON OR ENTER VEHICLES HIT BY <u>ENEMY</u> OR <u>FRIENDLY</u> FIRE SOMETIME AFTER THE IMMEDIATE POST-IMPACT RESCUE PERIOD? IF "NO," SKIP TO QUESTION 36.										129			
35a. IF "YES," WHAT TYPE OF VEHICLE?													
35a(1). Code "a" = ABRAMS battle tank										129a			
35a(2). Code "b" = BRADLEY fighting vehicle										129b			
35a(3). Code "c" = Other (identify on following lines)										129c			
35a(4). Code "d" = Don't Know										129d			
35b. HOW MANY TIMES?													
35b(1). Code "a" = 1 Time										129e			
35b(2). Code "b" = 2 Times										129f			
35b(3). Code "c" = 3- 10 times										129g			
35b(4). Code "d" = More than 10 times										129h			
35b(5). Code "e" = Don't know										129i			
35c. HOW LONG (IN TOTAL) WERE YOU ON BOARD THE VEHICLE(S)?													
35c(1). Code "a" = Less than 5 minutes										129j			
35c(2). Code "b" = 5-15 minutes										129k			
35c(3). Code "c" = 16-30 minutes										129l			
35c(4). Code "d" = More than 30 minutes										129m			
35c(5). Code "e" = Don't know										129n			
35d. WAS THE VEHICLE KNOWN TO BE CONTAMINATED WITH DU?										129o			
36. DID YOU PASS WITHIN 50 METERS (45.72 YARDS) OF A DAMAGED OR DESTROYED VEHICLE? IF "NO," SKIP TO QUESTION 37.										130			
36a. HOW LONG (IN TOTAL) AFTER THE DESTRUCTIVE EVENT?													
36a(1) Code "a" – Less than 12 hours										130a			

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DEPLETED URANIUM QUESTIONNAIRE, Continued							SSN								
36a(2). Code "b" = 12 hours – 24 hours												130b			
36a(3). Code "c" = more than 24 hours												130c			
36a(4). Code "d" = Don't know												130d			
36b. IF "YES," WHAT TYPE OF VEHICLE?															
36b(1). Code "a" = ABRAMS battle tank												130e			
36b(2). Code "b" = BRADLEY fighting vehicle												130f			
36a(3). Code "c" = Other (identify on following lines)												130g			
36a(4). Code "d" = Don't Know												130h			
36c. WAS THE VEHICLE BURNING?												130i			
37. WERE YOU WOUNDED AS A RESULT OF BEING IN, ON, OR WITHIN 50 METERS (45.72 YARDS) OF THE DAMAGED VEHICLE AT THE TIME IT WAS HIT? IF "NO," SKIP TO QUESTION 38.												131			
37a. WHERE YOU WOUNDED?															
37a(1) Code "a" = leg/foot												131a			
37b(2). Code "b" = arm/hand												131b			
37c(3). Code "c" = face/head												131c			
37d(4). Code "d" = neck												131d			
37e(5). Code "e" = body												131e			
37b. DO YOU HAVE RETAINED FRAGMENTS OR SHRAPNEL IN YOUR BODY?												131f			
38. DID YOU FIRE DU ROUNDS?												132			
39. DID YOU HANDLE BARE OR DAMAGED DU PENETRATOR ROUNDS? IF "NO," SKIP TO QUESTION 40.												133			
39a. DID YOU HANDLE THE ROUNDS WITH GLOVES?												133a			
39b. DID YOU HANDLE THE ROUNDS WITH SHIELDING?												133b			
<i>OTHER EXPOSURES</i>															
40. DID YOU HAVE EXPOSURE TO DU THAT IS <u>NOT</u> CAPTURED BY THIS QUESTIONNAIRE? IF "NO," SKIP TO QUESTION 41. IF "YES," DESCRIBE ON THE FOLLOWING LINES:												134			

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DEPLETED URANIUM QUESTIONNAIRE, Continued				SSN												
41. DO YOU HAVE OTHER EXPOSURES AND EXPERIENCES TO DISCUSS WITH THE PROVIDER? Code "Y" = Yes Code "N" = No IF "YES," DESCRIBE ON THE FOLLOWING LINES:										135						
42. IS THE 24-HOUR URINE COLLECTION FOR URANIUM BEING PERFORMED? Code "Y", Code "N," or Code "U" =Unknown. IF "NO" OR "UNKNOWN" PROVIDE EXPLANATION ON FOLLOWING LINES:										136						
43. DO YOU, THE VETERAN, CONSENT TO HAVING YOUR DATA SHARED WITH THE DEPARTMENT OF DEFENSE? Code "Y" = Yes or Code "N" = No.										137						
44. OTHER COMMENTS:																
45. NAME AND TITLE OF EXAMINER/REGISTRY PHYSICIAN (PRINT FULL NAME)																
46. SIGNATURE OF EXAMINER:																
<p><u>Instructions:</u> Once the DU questionnaire has been completed, VAMC RC will send a copy to AAC, with registry code sheet. If the veteran has already had a GW Registry examination, only the DU questionnaire will be sent to AAC. A copy of the questionnaire will also be sent to the DU Follow-up Program at the Baltimore VAMC with the package requesting the urine uranium test. The Baltimore DU Follow-up program staff will transmit the results of the urine uranium test directly to the AAC for database entry and to the VAMC of origin for entry into the veteran's medical record.</p> <p align="center">TO BE COMPLETED BY THE BALTIMORE VAMC FOLLOW-UP PROGRAM STAFF</p>																
47. CORRECTED URINE URANIUM (EXPRESSED PER MCG PER G CREATININE) 3 DIGITS TO THE LEFT AND 2 DIGITS TO THE RIGHT OF THE DECIMAL.										138-142				•		
48. REPEAT URINE URANIUM										143-147				•		
49. REMARKS:																

ATTACHMENT B

DEPLETED URANIUM PROGRAM CHECKLIST
24-HOUR URINE URANIUM COLLECTION
BALTIMORE VA MEDICAL CENTER

CONSULT URINE INSTRUCTIONS (REVISED 07/98)

PATIENT NAME: _____ Social Security
Number: _____

ADDRESS: _____ Specimen Date: _____

TELEPHONE: _____ Date of Birth: _____

Referring VA Medical Center: _____ Mail Code: _____
Address: _____

Referring Physician: _____

Beeper Number: _____ Telephone Number : _____

FAX Number (to receive report): _____

- ☐ Call DU Program at 1-800-815-7533 to obtain the specimen collection kit including the 24-hour specimen collection containers and shipping materials from DU Program. Only 32 oz Fischer Wide-mouth jugs will be accepted. Specimens received in any other container will be returned. Leaking containers will be returned.
- ☐ FAX a copy of this checklist with the top portion completed, and a completed copy of VA Form 10-9009D, Depleted Uranium (DU) Questionnaire, to 410-605-7943 PRIOR TO SENDING THE SPECIMEN.
- ☐ Schedule patient for 24-hour urine collection.

Date: _____

a. Time of first void (discarded) urine DAY 1: _____

b. Time of first void urine DAY 2: _____

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DU PROGRAM CHECKLIST - CONSULT URINE INSTRUCTIONS (CONTINUED)

- ☐ Instruct patient to urinate directly into the collection container(s). Uranium sticks to the sides of the container. Therefore, do not transfer urine due to potential loss of analyte. Issue 3 containers to patient to insure full 24-hour collection in approved containers.
- ☐ Instruct patient to collect urine beginning after first morning void of Day 1 and end collection after first morning void on Day 2 (the next day).
- ☐ Seal containers as tightly as possible. Double bag each urine container with absorbent material. Make sure each plastic bag is sealed tightly. Stabilize container inside the box with more absorbent packing material to prevent movement. The sample should be mailed in the package provided. *TIP: YOU CAN CONTACT YOUR LABORATORY SERVICES SUPERVISOR TO ASSIST IN PACKAGING.*
- ☐ A copy of this form sealed in a separate ziplock plastic bag should be enclosed with the sample for identification purposes and also faxed with the completed copy of VA Form 10-9009D to the DU office at 410-605-7943.
- ☐ SEND SPECIMEN VIA FEDEX. Call the DU Program Office at 800-815-7533 as soon as specimen has been shipped.

FED EX Tracking Number: _____

- ☐ SEND TO:

**PATHOLOGY AND LABORATORY MEDICINE SERVICE (113)
BALTIMORE VA MEDICAL CENTER
10 N. GREENE STREET
BALTIMORE, MARYLAND 21201
ATTN: DR. LAWRENCE BROWN (FOR DU PROGRAM)**

- ☐ Before sending this sample, call the DU program office at 1-800-815-7533 so that we can anticipate delivery. It is important that you fax a copy of this checklist, and a completed copy of VA Form 10-9009D to 410-605-7943.
- ☐ **You can expect notification of the results in approximately 45 days.**

ATTACHMENT C

**SAMPLE OF REQUEST FOR AND CONSENT TO RELEASE OF INFORMATION
FROM CLAIMANT'S RECORDS WITH OVERPRINT**

Attachment C is not available electronically.

You may make a copy of Attachment C in the Under Secretary for Health's Library
Room 675GG, VA Central Office